



## Complaint

JAMES Doherty was attacked  
by Mayor Linda Gorton  
from January 2021 through  
January 2022.

The Lexington Housing  
Authority discontinued  
his section 8 housing  
assistance for no reason  
since the forms asked  
were filled out and  
returned ~~the day after~~  
the day after they were  
received and they would  
not allow visitors in  
the office due to COVID-19.

FOX 1840, LLC  
FOX RUN Apartments  
Suite 138  
1840 McCullough Rd.  
Lexington, Ky 40511

The Landlord had recordings of noises that would go from beginning to end and then come back and play again that could hear in the room 24/7. Sleep was bad. They could turn the noise up loud.

Employees put their hands in my food and played with my food.

They spread some kind of oil or paste on my bed.

The employees vandalized the room the oil or paste was all around



Water was coming up through the drain in the sink, soon going over the sink and on the floor. The employees seen that going on for months and nothing was done till ~~just~~ not long before I left.

One door ~~was~~ to the building was not there when I moved and nothing to stop the the insects from going in the hall and then they took out the second. No storm door for the room.

Right after the lease  
was signed the employer  
the employee that was  
fired for gay sex.  
They are gross all the  
way through.

That Mayor owns ~~the~~ JAMES Doherty  
\$7,200 and he does not  
want to be anywhere  
around him.

James Doherty

JAMES DOHERTY

## Coronavirus - COVID -19

[Information for the COVID-19 vaccine for Fayette County is now available.](#)

[Information for COVID-19 testing sites.](#)

[Public notices](#) [Public records](#) [e2020](#) [Fax TV](#) [eFax 311](#)



**LEXINGTON**



Menu

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## About Mayor Linda Gorton

Linda Gorton, the longest continuously serving member of the Lexington-Fayette Urban County Council, is serving her first term as Lexington Mayor. Mayor Gorton was elected on November 6, 2018, winning 63% of the vote.

A native of Ohio, Mayor Gorton has lived in Lexington most of her adult life. In addition to her 16 years on the Council, including 4 years as Vice Mayor, Mayor Gorton has been a dedicated volunteer in our community.

Throughout the pandemic Mayor Gorton has focused her administration on three goals: keeping Lexington citizens safe by following state and CDC guidelines; continuing to provide basic services to citizens; and moving Lexington ahead, ensuring that our city continued to attract new jobs despite the pandemic. Even though the pandemic initially slowed down economic activity and triggered belt tightening in City Hall, Mayor Gorton accomplished those goals. Thanks to her conservative management of the budget, Lexington is emerging from the pandemic financially healthy.

In the summer of 2020, Mayor Gorton created the Mayor's Commission on Racial Justice & Equality to root out systemic racism in the Lexington community. The City is well on its way to implementation of the Commission's recommendations.

Mayor Gorton and her husband, Charlie, a retired Major General in the Army, have two children and five grandchildren. She is a registered nurse and graduate of the University of Kentucky.

## Contact

### Office of the Mayor

200 E. Main St.  
Lexington, KY

#### Hours:

*Monday – Friday: 9 a.m. – 5 p.m.*

Email us

(859) 258-3100

Fax: (859) 258-3194

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Lexington KY, Horse Capital of the World

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## Services

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[Trash & recycling](#)  
[Open data](#)  
[Maps](#)  
[Employees](#)  
[Staff login](#)  
[Jobs](#)  
[Media center](#)

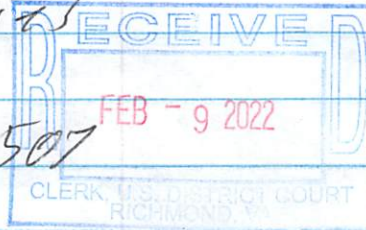
## Get in touch

200 E. Main St.  
Lexington, KY 40507  
 (859) 425-2055



2<sup>nd</sup> time asked for money returned

February 6<sup>th</sup> 2022  
Kentucky Utilities  
1 Quality Street  
Lexington, Ky 40507



James Deherty sent you  
in writing he would not  
be in for Run Apartment  
#138

1840 McCallough Dr  
Lexington, Ky 40511  
~~After~~ after January 5<sup>th</sup> 2022.

There is money still on  
account since the electricity  
used is not by him after  
that date. He would  
like that money returned  
to him

SEND UN Used Pipes, it Buck.  
James Deherty

The UPS Store #3557  
3126 W. Cary St.  
Richmond, Va 23221  
James Deherty #273

for 1840, LLC  
 1840 McCullough Rd.  
 Lexington, TX 40511

The Deposit for Fox Run ~~Appt~~  
 Apartment #138 is to be  
 returned to James Roberts

$$\begin{array}{r}
 201 \\
 \times 12 \\
 \hline
 402 \\
 2010 \\
 \hline
 2412
 \end{array}
 \qquad
 \begin{array}{r}
 2830 \text{ Total Paid} \\
 - 2412 \\
 \hline
 418
 \end{array}$$

\$418 is owed James Roberts

THE UPS STORE #3557  
 3126 W. Cary St  
 Richmond, VA 23221  
 James Roberts #273

James Roberts

1st time Jan. 10th 2022  
 This is second time  
 February 6th 2022



**a PPL company**

## BILLING SUMMARY

Previous Balance	-178.92
Payment(s) Received	0.00
<b>Balance as of 6/22/21</b>	<b>-\$178.92</b>
Current Electric Charges	4.92
Current Taxes and Fees	0.32
<b>Total Current Charges as of 6/22/21</b>	<b>\$5.24</b>
<b>Total Amount Due</b>	<b>-\$173.68</b>
This is a corrected bill.	

AMOUNT DUE  
**-\$173.68**

**DUE DATE**  
**7/16/21**

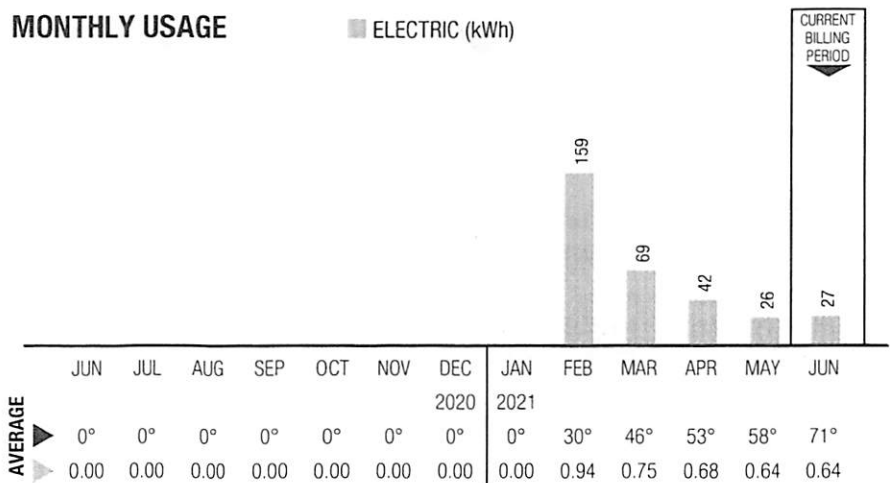
Online or phone payments made before 7 pm ET will be posted same day

<b>Account Name:</b>	<b>JAMES DOHERTY</b>
<b>Service Address:</b>	1840 Mccullough Dr 138 LEXINGTON KY
<b>Online Payments:</b>	lge-ku.com
<b>Telephone Payments:</b>	(859) 255-0394, press 1-2-3 24 hours a day; \$2.00 fee
<b>Customer Service:</b>	(859) 255-0394 M-F, 7am-7pm ET
<b>Walk-in Center:</b>	1 Quality Street Lexington, KY 40507 M-F, 9am-5pm ET


Next read will occur 7/20/21 - 7/22/21 (Meter Read Portion 14)

## MONTHLY USAGE

ELECTRIC (kWh)



## BILLING PERIOD AT-A-GLANCE

	THIS YEAR	LAST YEAR
<b>Average Temperature</b>	<b>71°</b>	<b>0°</b>
Number of Days Billed	32	0
 <b>Avg. Electric Charges per Day</b>	<b>\$0.64</b>	<b>\$0.00</b>
Avg. Electric Usage per Day (kWh)	0.84	0.00

Please return only this portion with your payment. Make checks payable to KU and write your account number on your check.

Amount Due <b>7/16/21</b>	<b>-\$173.68</b>
<b>After Due Date, Pay this Amount:</b>	<b>\$0.00</b>
<b>WinterCare Donation:</b>	
<b>Total Amount Enclosed:</b>	

## No Payment Required



**a PPL company**

PO Box 25212  
Lehigh Valley, PA 18002-5212

Account # **3500-0783-4111**  
Service Address: 1840 Mccullough Dr 138

#217325198 1#  
210011791 01 AV 0.398  
JAMES DOHERTY  
1840 MCCULLOUGH DR APT 138  
LEXINGTON, KY 40511-1543

[illegible]



Lexington Housing Authority  
300 West New Circle Rd  
Lexington, KY 40505  
(859) 281-5060

4<sup>th</sup> Tonya Christopher

3<sup>rd</sup> Leslie Stillwater

2<sup>nd</sup> Carol Eldred

1<sup>st</sup> Francisco Lovco

HCV Specialists

2022  
\$1154

30%  
346.20

40%  
461.60

50%  
577.00

70%  
807.8

60%  
692.4

2021  
\$1089

30%  
326.70

40%  
435.60

50%  
544.50

70%  
762.30

60%  
~~544.50~~  
653.40





## **LEXINGTON-FAYETTE URBAN COUNTY HOUSING AUTHORITY**

300 West New Circle Road • Lexington, KY 40505 • Phone: (859) 281-5060 • Fax: (859) 281-5055

JAMES E DOHERTY  
SUITE 138  
1840 MCCULLOUGH DR  
LEXINGTON, KY 40511

October 19, 2021

Your application has now been taken for the Housing Choice Voucher Rental Assistance Program. The following information is necessary to complete the application process in order that we may determine/continue your eligibility/ineligibility for the program.

Please provide items checked (X) below:

- ☐ Authorization for Release signed/dated by all adults
- ☐ Personal Declaration Form
- ☐ Birth Certificate or ☐ Picture ID for: \_\_\_\_\_
- ☐ Social Security Card(s): \_\_\_\_\_
- ☐ Custody papers ☐ **Unrelated Child Form**
- ☐ Request for Tenancy Approval
- ☐ HAP Contract and Lease Agreement Amendment
- ☒ Other: **RECERTIFICATION PACKET/VERIFICATION**

The HCV Specialist will request all items marked with an asterisk (\*)

- ☐ Statement regarding full-time student status
- ☐ Statement of Grants/Scholarships
- ☐ Statement regarding Child Support
- ☐ Child Care Expense
- ☐ Printouts 4B, 43, 48 from the Unemployment Office
- ☐ Statement from employer(s)
- ☐ Written statement from KTAP
- ☐ Letter from Social Security Office
- ☐ Statement from company verifying pension
- ☐ Bank statement with balance & interest received on check and/or saving accts.
- ☐ Medical bills showing payments made by client and balance due.
- ☐ Pharmacy Statement showing annual cost of prescriptions paid by client-not insurance
- ☐ Verification of monthly health/hospitalization insurance
- ☐ Disability Statement
- ☐ Landlord Certification of Decrease in Household members

Indicated above is the information that is needed to process your case. The requested information must be returned to our office by you or by mail on or before **October 29, 2021**. Your failure to supply this information may result in your termination from the Housing Choice Voucher Program.



# LEXINGTON-FAYETTE URBAN COUNTY HOUSING AUTHORITY

300 West New Circle Road • Lexington, KY 40505 • Phone: (859) 281-5060 • Fax: (859) 281-5055

## HAP CONTRACT AND LEASE AMENDMENT

January 19, 2021

Document #: 1225229

Fox 1840 LLC  
1840 McCullough Dr  
Lexington, KY 40511

This Amendment is between **Fox 1840 LLC** (Owner), and **James E Doherty** holding and the LEXINGTON FAYETTE URBAN HOUSING AUTHORITY regarding the housing unit described as:

1840 McCullough Dr  
Suite 138  
Lexington, KY 40511

This Amendment changes the respective terms of the Housing Assistance Payment (HAP) Contract between the Owner and the Lexington Housing Authority, and the Lease between the Tenant and the Owner as follows:

1. The reason for this amendment is:
  - ( ) RE-EXAMINATION - An annual review of family income, expenses, assets and household composition.
  - ( ) INTERIM RE-EXAMINATION - Interim change(s) in family, income, expenses, assets and household composition.
  - ( ) RENT ADJUSTMENT - The Housing Authority approved changes in contract rent.
2. The change results in an adjustment in the following payments:

	<u>FROM</u>	<u>TO</u>
HAP Payment	\$ 0.00	\$ 394.00
Tenant Rent	\$ 0.00	\$ 201.00
Total Contract Rent	\$ 0.00	\$ 595.00
Utility Reimbursement	\$ 0.00	\$ 0.00

3. The Effective Date of this Amendment and the change is **01/13/2021**.
4. The Tenant's next re-examination date is **01/01/2022**.
5. This Amendment is prepared in accordance with the terms and conditions of both the HAP Contract between the Owner and the Housing Authority, and the current Lease between the Tenant and the Owner; and the Amendment is made a part of the HAP Contract and the current lease. All other covenants, terms, and conditions in the HAP Contract and the current lease shall remain the same.
6. The Housing Assistance Payment (HAP) and the Tenant Rent equals the total contract rent. The Tenant may not pay more than the amount stated above.

Sincerely,

  
Francisco Lovko



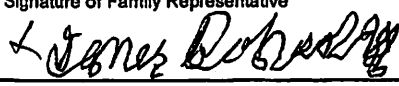
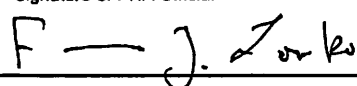
**Voucher**  
**Housing Choice Voucher Program**

**U.S. Department of Housing  
and Urban Development  
Office of Public and Indian Housing**

OMB No. 2577-0169  
(Exp. 07/31/2022)

Public Reporting Burden for this collection of information is estimated to average 0.05 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number. Assurances of confidentiality are not provided under this collection. This collection of information is authorized under Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). The information is used to authorize a family to look for an eligible unit and specifies the size of the unit. The information also sets forth the family's obligations under the Housing Choice Voucher Program.

**Privacy Act Statement.** The Department of Housing and Urban Development (HUD) is authorized to collect the information required on this form by Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). Collection of family members' names is mandatory. The information is used to authorize a family to look for an eligible unit and specifies the size of the unit. The information also sets forth the family's obligations under the Housing Choice Voucher Program. HUD may disclose this information to Federal, State and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. It will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. Failure to provide any of the information may result in delay or rejection of family voucher issuance.

Please read entire document before completing form Fill in all blanks below. Type or print clearly.		Voucher Number <b>109761</b>
1. Insert unit size in number of bedrooms. (This is the number of bedrooms for which the Family qualifies, and is used in determining the amount of assistance to be paid on behalf of the Family to the owner.)		1. Unit Size <b>1</b>
2. Date Voucher Issued (mm/dd/yyyy) Insert actual date the Voucher is issued to the Family.		2. Issue Date (mm/dd/yyyy) <b>08/12/2020</b>
3. Date Voucher Expires (mm/dd/yyyy) must be at least sixty days after date issued. Voucher is issued. (See Section 6 of this form.)		3. Expiration Date (mm/dd/yyyy) <b>10/11/2020</b>
4. Date Extension Expires (if applicable)(mm/dd/yyyy) (See Section 6. of this form)		4. Date Extension Expires (mm/dd/yyyy)
5. Name of Family Representative <b>James E Doherty</b>	6. Signature of Family Representative 	Date Signed (mm/dd/yyyy) <b>08/12/2020</b>
7. Name of Public Housing Agency (PHA) <b>Lexington Housing Authority</b>		
8. Name and Title of PHA Official <b>Francisco Lovko</b>	9. Signature of PHA Official 	Date Signed (mm/dd/yyyy) <b>08/12/2020</b>

**1. Housing Choice Voucher Program**

- A. The public housing agency (PHA) has determined that the above named family (item 5) is eligible to participate in the housing choice voucher program. Under this program, the family chooses a decent, safe and sanitary unit to live in. If the owner agrees to lease the unit to the family under the housing choice voucher program, and if the PHA approves the unit, the PHA will enter into a housing assistance payments (HAP) contract with the owner to make monthly payments to the owner to help the family pay the rent.
- B. The PHA determines the amount of the monthly housing assistance payment to be paid to the owner. Generally, the monthly housing assistance payment by the PHA is the difference between the applicable payment standard and 30 percent of monthly adjusted family income. In determining the maximum initial housing assistance payment for the family, the PHA will use the payment standard in effect on the date the tenancy is approved by the PHA. The family may choose to rent a unit for more than the payment standard, but this choice does not change the amount of the PHA's assistance payment. The actual amount of the PHA's assistance payment will be determined using the gross rent for the unit selected by the family.

**2. Voucher**

- A. When issuing this voucher the PHA expects that if the family finds an approvable unit, the PHA will have the money available to enter into a HAP contract with the owner. However, the PHA is under no obligation to the family, to any owner, or to any other person, to approve a tenancy. The PHA does not have any liability to any party by the issuance of this voucher.
- B. The voucher does not give the family any right to participate in the PHA's housing choice voucher program. The family becomes a participant in the PHA's housing choice voucher program when the HAP contract between the PHA and the owner takes effect.
- C. During the initial or any extended term of this voucher, the PHA may require the family to report progress in leasing a unit at such intervals and times as determined by the PHA.